

POSITION DESCRIPTION (Please Read Instructions on the Back)

2. Reason for Submission										3. Service										4. Employing Office Location										5. Duty Station										1. Agency Position No.																													
<input type="checkbox"/> Redescription <input checked="" type="checkbox"/> New <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other										<input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field																														6. OPM Certification No.																													
Explanation (Show any positions replaced)										7. Fair Labor Standards Act										8. Financial Statements Required										9. Subject to IA Action																																							
Standard MWR NAF PD										<input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Nonexempt										<input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interest										<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																							
										10. Position Status										11. Position Is										12. Sensitivity										13. Competitive Level Code																													
										<input type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)										<input type="checkbox"/> Supervisory <input type="checkbox"/> Managerial <input type="checkbox"/> Neither										<input checked="" type="checkbox"/> 1--Non-Sensitive <input type="checkbox"/> 3--Critical <input type="checkbox"/> 2--Noncritical Sensitive <input type="checkbox"/> 4--Special Sensitive										14. Agency Use																													
15. Classified/Graded by										Official Title of Position										Pay Plan										Occupational Code										Grade										Initials										Date									
a. Office of Personnel Management																																																																					
b. Department, Agency or Establishment																																																																					
c. Second Level Review										Laborer										NA										3502										03										SW										12-31-01									
d. First Level Review																																																																					
e. Recommended by Supervisor or Initiating Office																																																																					
16. Organizational Title of Position (if different from official title)																				17. Name of Employee (if vacant, specify)																																																	
18. Department, Agency, or Establishment																				c. Third Subdivision																																																	
a. First Subdivision																				d. Fourth Subdivision																																																	
b. Second Subdivision																				e. Fifth Subdivision																																																	
19. Employee Review-This is an accurate description of the major duties and responsibilities of my position.																				Signature of Employee (optional)																																																	
20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that																				this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations.																																																	
a. Typed Name and Title of Immediate Supervisor																				b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)																																																	
Signature										Date										Signature										Date																																							
21. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards.																				22. Position Classification Standards Used in Classifying/Grading Position																																																	
Typed Name and Title of Official Taking Action																				OPM FWS JGS for Laborer 3502, HRCD-2 Dec 96																																																	
S. J. NEW																																																																					
Principal Classifier																																																																					
Signature										Date										Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.																																																	
										12-31-01																																																											
23. Position Review										Initials										Date										Initials										Date										Initials										Date									
a. Employee (optional)																																																																					
b. Supervisor																																																																					
c. Classifier																																																																					
24. Remarks																																																																					
25. Description of Major Duties and Responsibilities (See Attached)																																																																					

NONAPPROPRIATED FUND POSITION DESCRIPTION

JOB TITLE: Laborer **POSITION NUMBER** 01-025A

JOB SERIES: 3502 **PAY LEVEL:** NA-3

Summary of Duties: Performs one or more of the following duties: Uses heavy power mowers, adjusts blades, and cleans and oils mowers; cuts trees, using ax or chain saw. Digs ditches and trenches with pick and shovel where dirt is hard and compact and does grading and sloping. Occasionally and for short periods of time, breaks up pavement with jackhammer, mixes and pours concrete, asphalt, and hot mix, fills and levels holes in damaged roads.

Performs other related duties as required.

Skills and Knowledge: Ability to operate, control, and clean heavy power equipment and to work safely with heavy tools. Ability to provide continual care and attention both to avoid accidents and to finish the work properly. Prior job experience or on-the-job training is normally required to gain this ability. Ability to complete assignments involving several tasks or processes which require remembering directions, sequences, etc.

Responsibility: For most assignments, the supervisor does not give detailed instructions or provide continual supervision. The incumbent is responsible for completing work after getting initial oral or written instructions.

Physical Effort: Exerts very heavy physical effort in doing such tasks as frequently lifting and moving objects weighing over 50 lbs., running power mowers on grades or pushing heavy wheelbarrow loads of cement, etc.

Working Conditions: Work indoors may expose the worker to drafts, noise, dust and dirt and require standing on concrete floors for long periods. Special care is required to avoid serious injuries. Outdoor work is performed in all kinds of weather. Must wear issued protective gear.